PAGE 1 OF 1 STANDARD FORM 120 REV. 1. REPORT NO. 2. DATE MAILED 3. TOTAL COST REPORT OF **APRIL 1957 EXCESS PERSONAL** GEN. SERV. ADMIN. **PROPERTY** 362417-4219-0234 08/07/2014 \$818,900.00 FPMR (41 CFR) 101-43.311 X a. ORIGINAL (Check one only of c. PARTIAL (Also check "e" and/or "f" e. OVERSEAS 4. TYPE OF REPORT "a," "b," "c," or "d") if appropriate) b. CORRECTED d. TOTAL W/D f, CONTRACTORS INV 5. TO (Name and Address of Agency to which report is made) THRU 6. APPROPR. OR FUND TO BE REIMBURSED (If any) GSA-3QSCA AREA PROPERTY OFFICE P.O. BOX 373, HUMMELSTOWN, PA 17036 ATTN: MR. ROBERT KITSOCK 717-580-5303 7. FROM (Name and Address of Reporting Agency) 8. REPORT APPROVED BY (Name and Title) 1 DEPARMENT OF VETERANS AFFAIRS, PITTSBURGH HEALTHCARE SYATEM atual! JUSTIN HITE-Accountability Officer 7180 HIGHLAND DRIVE, PITTSBURGH, PA 15206 9. FOR FURTHER INFORMATION CONTACT (Title, Address and Telephone No.) 10. AGENCY APPROVAL (If applicable) SCOTT JOHN- SUPPLY TECHNICIAN 1010 DELAFIELD ROAD PITTSBURGH, PA 15215 CELL (412) 216-9071 11. SEND PURCHASE ORDERS OR DISPOSAL INSTRUCTIONS TO (Title, Address and Telephone No.) 12. GSA CONTROL NO. SAME AS "9" 16, AGENCY CONTROL NO. 17, SURPLUS RELEASE 13. FSC GROUP NO. 14. LOCATION OF PROPERTY (If location is to be abandoned, give date) 15. REI M. RED DATE YES NO 7180HIGHLAND DRIVE PITTSBURGH, PA 15206 **EXCESS PROPERTY LIST ACQUISITION COST FAIR** NUMBER **VALUE %** PER UNIT ITEM NO. DESCRIPTION UNIT OF UNITS TOTAL COND (h) (a) (b) (c) (d) (e) (f) (g) See Attached SYSTEMS FURNITURE/CUBICLES EA 3,000.00 \$525,000.00 175 Sheets **FILE CABINETS** 800.00 60,000:00 EΑ 75 CHAIRS 600.00 72,000.00 EA 120 STORAGE CONTAINERS, STACKABLE 220 20.00 4,400.00 EA A/V EQUIPMENT 20,000.00 20,000.00 EA 1 10,000.00 10,000.00 WHEELCHAIR LIFT 1 EA PHYSICAL THERAPY EQUIPMENT EA 1 10.000.00 10.000.00 50,000.00 VALVES AND FITTINGS, COPPER/BRASS EΑ 2,000 25.00 PLUMBING SUPPLIES, EXPENDABLE 100.00 30,000.00 EA 300 37,500.00 PLUMBING EQUIPMENT 500.00 EA 75